

APPLICATION FOR OPEN BURNING

City of Savannah
Savannah Fire and Emergency Services
121 East Oglethorpe Avenue - Savannah, GA 31401
Phone (912) 644-7965

APPLICANT NAME:(Last) (First) (Middle)

ADDRESS:

HOME TELEPHONE

BUSINESS TELEPHONE

NAME OF PERSON RESPONSIBLE FOR BURNING:

NAME: (Last) (First) (Middle)

ADDRESS TELEPHONE

TYPE OF BURNING:_____

LOCATION OF BURN:_____

TYPE OF FIREFIGHTING EQUIPMENT AVAILABLE AT LOCATION:_____

DATE OR DATES BURN IS TO TAKE PLACE:_____

TIME OF DAY BURNING WILL PLACE: _____

I have read, and understand, the attached Rules and Regulations -concerning open burning within the City of Savannah Georgia, and hereby agree to abide by these Rules arid Regulations.

I further understand I am to notify the Environmental Protection Agency prior to burning, at one of the following telephone numbers:

Savannah Office 1-912-264-7284
6555 Abercorn Street Suite 130

Brunswick Office 1-912-264-7284

SIGNATURE:_____ DATE:_____

APPROVED:_____ DATE:_____